

1. Details of Policyholder

Full Name & Address of Policyholder	Contact Number
_____	_____
_____	Email Address
_____	_____
_____	ABN
_____	_____
Insurance Company	Policy Number
_____	_____

2. Loss Details

Date of Loss: _____	Time of Loss: _____
Location: _____	_____
State clearly how the loss occurred (please attach additional pages of required)	

3. Police

Have the Police been notified? <i>All Burglary/Theft/Malicious Damage claims must be reported</i>	Yes	No
Date reported to the Police _____	Police Station _____	
Police Report Number _____		

4. Third Parties

Do you know who was responsible for the damage?	Yes	No
Full Name & Address _____	Other details (e.g. Registration Number)	
_____	_____	
_____	_____	

5. History

In the last 5 years have you:

- Had any insurance policy declined, cancelled, refused or had any special terms imposed?	Yes	No
- Been convicted of or had any fines or penalties imposed for any criminal offence?	Yes	No
- Suffered a loss or made a claim on a property related insurance policy?	Yes	No

If yes, please specify date and particulars below:

6. Description of Property Lost/Damaged/Stolen

Item	Year Purchased	Where Purchased	Original Purchase Price	Replacement/Repair Cost
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$

Please attach supporting documents if available.

7. Payment Details

If any payments are to be made to you directly, where should payment be made?

Account Name: _____

Account Number: _____

BSB: _____

Are you registered for GST purposes?

Yes

No

If yes, what is your entitlement to an Input Tax Credit (ITC%)? _____

%

8. Declaration

Name _____

Date _____

Signature _____